BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000									09/769,082					
CLAIMS AS FILED - PART I (Column 1) (C						SM Column 2) TYI			IALL ENTITY PE (OTHER THAN			
TOTAL CLAIMS					·			RATE	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			/27 minus 20=		. 107			X\$ 9=	963	OR	X\$18=			
INDEPENDENT CLAIMS			5 minus 3 =		· 2			X40=	80	OR	X80=			
MULTIPLE DEPENDENT CLAIM P			RESENT				ľ	. 405	100	1	. 070			
* If the difference in column 1 is less than zero, enter "0" in column 2							Į	+135=	1 200	OR	+270=			
CLAIMS AS AMENDED - PART II								TOTAL	1398	OR	TOTAL OTHER	THAN		
		(Column 1)				(Column 3)		SMALL	ENTITY	OR	SMALL			
AMENDMENT &		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=			
	Independent	*	Minus			=		X40=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	*,		
								TOTAL			TOTAL	: .*** *		
	(Column 1) (Column 2) (Column 3)										ADDIT. FEE			
AMENDMENT B		CLAIMS HI		HIGH	HEST		Ιг		ADDI-			ADDI-		
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=			
	Independent		Minus	***		=		X40=		OR	∵X80=			
	FIRST PRESE	NTATION OF MU	JETIPLE DEF	PENDENI	CLAIM		!	+135=		OR	+270 =			
						•	L	TOTAL			TOTAL			
		(Column 1)		(Colur	mn 2)	(Column 3)	μ	ADDIT. FEE			ADDIT. FEE			
Ö		CLAIMS REMAINING		HIGH NUM	EST		Г		ADDI-			ADDI-		
AMENDMENT C		AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE		
	Total	•	Minus	**		= .		X\$ 9=	1	OR	X\$18=	, , , , ,		
	Independent	•	Minus	***		=	lt	X40=	-		X80=			
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.														
** (** If the entry in column 1 is less than the entry in column 2, write 10" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		ber Previously Pai					r foui	nd in the ap	propriate box	in co	lumn 1.			

Application or Docket Number